POLITICAL/ISSUE INQUIRY FORM (TO BE COMPLETED BY STATION REPRESENTATIVE RESPONDING TO THE INQUIRY)

<u>INSTRUCTIONS</u>: This form must be completed as to all <u>requests</u>, both oral and written, for broadcast time to be used by or on behalf of (1) a candidate for public office or (2) persons who wish to communicate a message relating to "any political matter of national importance" as defined in the Bipartisan Campaign Reform Act of 2002. It is to be kept in the Station Public File for a period of two years.

| | STATION: | WKXW | | DATE OF REQUEST: | 10/20/16 |
|---------------|---|---------------------|---|-------------------------|----------|
| INQUIR' | Y MADE BY: Petta | ı Ryan | | | |
| | | | | | |
| AGENC | / (if any): Petta Ry | an and Co. | | | |
| | | | | | |
| ADDRES | SS OF AGENCY: 54 | 2 High Street | | | |
| CITY ST | ATE, ZIP OF AGEN | JCV: Clinton MA | 01510 | | |
| 0111,01 | ME, Ell OT MOLI | ver. enittori, ivir | (01310 | | |
| TELEPH | ONE NUMBER OF | AGENCY: 508-9 | 75-4097 | | |
| CANDID | ATE 12 | | | _ | |
| CANDID | ATE: Vincent Solo | omeno III for Mo | nmouth Count | y Surrogate | |
| ORGAN | IZATION OR SPON | SORING AUTHO | ORITY (WHO WI | LL PAY): Solomeno for S | urrogate |
| | | | *************************************** | | |
| IF SPON | SOR IS A COMMI | TTEE, NAME OF | COMMITTEE: S | olomeno for Surrogate | |
| ADDRES | S OF COMMITTEI | F: P O Boy 186 | | | |
| | or committee | L. 1 .O. BOX 100 | | | |
| CITY, ST | ATE, ZIP OF COM | MITTEE: Hazlet, | NJ 07730 | | |
| TEI EDU/ | ONE NUMBER OF | | 22 720 0000 | | |
| ILLEFIN | JNE NOWBER OF | COMMITTEE: 7. | 32-739-8888 | | |
| COMMI | TTEE OFFICERS: | | | | |
| <u>CHAIRM</u> | IAN: Vincent Solo | meno | | | |
| VICE CH | AIRMAN: | | | | |
| TREASU | RER: Matthew An | nderson | | | |
| SECRETA | ARY: | | | | |
| IS THIS T | THE CANDIDATE'S | AUTHORIZED C | OMMITTEE? | X) YES () NO | |
| OFFICE 9 | SOUGHT: Monmo | outh County Surr | ogate | PARTY AFFILIATION: De | mocrat |
| | ()FEDERAL | () STATE | | X LOCAL | mocrat |
| | , | () 5 // () | - | AX 2001/2 | |
| ELECTIO | N AND DATE: No | vember 8, 2016 | | | |
| | () PRIMARY | ₩ GENE | RAL | | |

| FOR ISSUE ADS ONLY: | | | | | |
|---|--|--|--|--|--|
| A. CANDIDATE(S) AND OFFICE (IF ANY) REFERRED TO: | | | | | |
| B. FEDERAL ELECTION(S) (IF ANY) REFERRED TO: | | | | | |
| C. <u>ISSUE(S) DISCUSSED:</u> | | | | | |
| D. NAME, ADDRESS, PHONE NUMBER OF CONTACT: | | | | | |
| | | | | | |
| DATES REQUESTED: Week of October 24-28 | | | | | |
| LENGTH OF SPOT/PROGRAM TIME REQUESTED: :60 spot; times to be determined | | | | | |
| REQUEST MADE: | | | | | |
| X) IN WRITING () ORALLY | | | | | |
| *IF REQUEST MADE IN WRITING, ATTACH AND RETAIN* | | | | | |
| | | | | | |
| STATION OFFER (RATE CARD MEDIA KIT, ETC): | | | | | |
| Contract will have details. Rate card from Katz's national database of rates. | | | | | |
| DISPOSITION OF REQUEST. | | | | | |
| DISPOSITION OF REQUEST: () DENIED | | | | | |
| | | | | | |
| IF NOT GRANTED, STATE REASONS BELOW. IF IN WRITING, ATTACH AND RETAIN. IF GRANTED, ATTACH CONTRACT AND INVOICE, WHEN AVAILABLE. | | | | | |
| GRANTED, ATTACH CONTRACT AND INVOICE, WHEN AVAILABLE. | | | | | |
| REQUEST FOR DOCUMENTATION THAT CANDIDATE IS LEGALLY QUALIFIED: | | | | | |
| () YES (x) NO | | | | | |
| ATTACH ANY WRITTEN DOCUMENTATION RECEIVED. | | | | | |
| DATE POLITICAL DISCLOSURE FORM SUBMITTED TO REQUESTOR (DATE MATERIALS SENT FOR | | | | | |
| REQUEST): Client already had NAB form. Emailed it to us on 10/20/16 already filled out. | | | | | |
| | | | | | |

COMMENTS SECTION

